

In re **Randy Stroh**

Case No. _____
(if known)

SCHEDULE A - REAL PROPERTY

Description and Location of Property	Nature of Debtor's Interest in Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, Without Deducting Any Secured Claim or Exemption	Amount Of Secured Claim
Single Family Residence 1084 Heavens Gate Lake in the Hills, IL 60156	Joint	J	\$190,000.00	\$318,000.00

Total: \$190,000.00

(Report also on Summary of Schedules)

In re **Randy Stroh**

Case No. _____
(if known)

SCHEDULE B - PERSONAL PROPERTY

Type of Property	None	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, Without Deducting any Secured Claim or Exemption
1. Cash on hand.	X			
2. Checking, savings or other financial accounts, certificates of deposit or shares in banks, savings and loan, thrift, building and loan, and home-stead associations, or credit unions, brokerage houses, or cooperatives.		Checking Account	J	\$500.00
		Savings account	-	\$500.00
3. Security deposits with public utilities, telephone companies, landlords, and others.	X			
4. Household goods and furnishings, including audio, video and computer equipment.		Household Furniture - all over ten years old	J	\$1,500.00
5. Books; pictures and other art objects; antiques; stamp, coin, record, tape, compact disc, and other collections or collectibles.	X			
6. Wearing apparel.		Personal Clothing	H	\$1,200.00
7. Furs and jewelry.	X			
8. Firearms and sports, photographic, and other hobby equipment.	X			
9. Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	X			
10. Annuities. Itemize and name each issuer.	X			

In re **Randy Stroh**

Case No. _____

(if known)

SCHEDULE B - PERSONAL PROPERTY

Continuation Sheet No. 1

Type of Property	None	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, Without Deducting any Secured Claim or Exemption
11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	X			
12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	X			
13. Stock and interests in incorporated and unincorporated businesses. Itemize.		Own 100% of Stock in Efficiency Transport Inc.	J	\$100.00
14. Interests in partnerships or joint ventures. Itemize.	X			
15. Government and corporate bonds and other negotiable and non-negotiable instruments.	X			
16. Accounts receivable.	X			
17. Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	X			
18. Other liquidated debts owed to debtor including tax refunds. Give particulars.	X			

In re **Randy Stroh**

Case No. _____

(if known)

SCHEDULE B - PERSONAL PROPERTY

Continuation Sheet No. 2

Type of Property	None	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, Without Deducting any Secured Claim or Exemption
19. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			
20. Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			
21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	X			
22. Patents, copyrights, and other intellectual property. Give particulars.	X			
23. Licenses, franchises, and other general intangibles. Give particulars.	X			
24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25. Automobiles, trucks, trailers, and other vehicles and accessories.		2007 Outlook 150k miles	J	\$2,500.00
		2007 HOnda CRV	J	\$6,000.00

In re **Randy Stroh**

Case No. _____

(if known)

SCHEDULE B - PERSONAL PROPERTY

Continuation Sheet No. 3

Type of Property	None	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, Without Deducting any Secured Claim or Exemption
		2005 Mustang	H	\$5,000.00
26. Boats, motors, and accessories.	X			
27. Aircraft and accessories.	X			
28. Office equipment, furnishings, and supplies.		Computer, Printer	H	\$200.00
29. Machinery, fixtures, equipment, and supplies used in business.	X			
30. Inventory.	X			
31. Animals.	X			
32. Crops - growing or harvested. Give particulars.	X			
33. Farming equipment and implements.	X			
34. Farm supplies, chemicals, and feed.	X			
35. Other personal property of any kind not already listed. Itemize.	X			
Total >				\$17,500.00

3

continuation sheets attached

(Include amounts from any continuation sheets attached. Report total also on Summary of Schedules.)

In re **Randy Stroh**

Case No. _____
(If known)

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor claims the exemptions to which debtor is entitled under:
 (Check one box)

☐ 11 U.S.C. § 522(b)(2)
 ☒ 11 U.S.C. § 522(b)(3)

☐ Check if debtor claims a homestead exemption that exceeds \$155,675.*

Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
Single Family Residence 1084 Heavens Gate Lake in the Hills, IL 60156	735 ILCS 5/12-901 & 902	\$0.00	\$190,000.00
Checking Account	735 ILCS 5/12-1001(b)	\$500.00	\$500.00
Savings account	735 ILCS 5/12-1001(b)	\$500.00	\$500.00
Household Furniture - all over ten years old	735 ILCS 5/12-1001(b)	\$1,500.00	\$1,500.00
Personal Clothing	735 ILCS 5/12-1001(a), (e)	\$1,200.00	\$1,200.00
Own 100% of Stock in Efficiency Transport Inc.	735 ILCS 5/12-1001(b)	\$100.00	\$100.00
2007 Outlook 150k miles	735 ILCS 5/12-1001(c)	\$2,400.00	\$2,500.00
2007 HOnda CRV	735 ILCS 5/12-1001(c)	\$0.00	\$6,000.00
	735 ILCS 5/12-1001(b)	\$1,400.00	
2005 Mustang	735 ILCS 5/12-1001(c)	\$0.00	\$5,000.00
Computer, Printer	735 ILCS 5/12-1001(d)	\$200.00	\$200.00
		\$7,800.00	\$207,500.00

* Amount subject to adjustment on 4/01/16 and every three years thereafter with respect to cases commenced on or after the date of adjustment.

B6D (Official Form 6D) (12/07)
In re **Randy Stroh**

Case No. _____
(if known)

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

☐ Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER (See Instructions Above.)	CODEBATOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
ACCT #: xxx0801 McCormick 106 LLC c/o Mitchell A. Lieberman NOONAN & IBERMAN, LTD 105 W. Adams St., Suite 1800 Chicago, IL 60603	J	DATE INCURRED: 2012 NATURE OF LIEN: Mortgage COLLATERAL: Residence REMARKS: VALUE: \$190,000.00				\$318,000.00	\$128,000.00
ACCT #: xxxxxx9699 Wells Fargo Dealer Finance PO Box 25341 Santa Ana, CA 92799-5344	J	DATE INCURRED: 2005 NATURE OF LIEN: Auto Loan COLLATERAL: 2005 Mustang REMARKS: VALUE: \$5,000.00				\$4,964.00	
ACCT #: xxxxxx0744 Wells Fargo Dealer Finance PO Box 25341 Santa Ana, CA 92799-5344	J	DATE INCURRED: 2007 NATURE OF LIEN: Auto Loan COLLATERAL: 2007 Honda CRV REMARKS: VALUE: \$6,000.00				\$4,006.00	
Subtotal (Total of this Page) >						\$326,970.00	\$128,000.00
Total (Use only on last page) >						\$326,970.00	\$128,000.00

No continuation sheets attached

(Report also on Summary of Schedules.)
(If applicable, report also on Statistical Summary of Certain Liabilities and Related Data.)

B6E (Official Form 6E) (04/13)

In re **Randy Stroh**

Case No. _____
(If Known)

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

☐ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets.)

☐ **Domestic Support Obligations**

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

☐ **Extensions of credit in an involuntary case**

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).

☐ **Wages, salaries, and commissions**

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$12,475* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

☐ **Contributions to employee benefit plans**

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

☐ **Certain farmers and fishermen**

Claims of certain farmers and fishermen, up to \$6,150* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).

☐ **Deposits by individuals**

Claims of individuals up to \$2,775* for deposits for the purchase, lease or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).

☒ **Taxes and Certain Other Debts Owed to Governmental Units**

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

☐ **Commitments to Maintain the Capital of an Insured Depository Institution**

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507(a)(9).

☐ **Claims for Death or Personal Injury While Debtor Was Intoxicated**

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

☐ **Administrative allowances under 11 U.S.C. Sec. 330**

Claims based on services rendered by the trustee, examiner, professional person, or attorney and by any paraprofessional person employed by such person as approved by the court and/or in accordance with 11 U.S.C. §§ 326, 328, 329 and 330.

** Amounts are subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.*

B6E (Official Form 6E) (04/13) - Cont.

In re **Randy Stroh**

Case No. _____
(If Known)

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

TYPE OF PRIORITY	Taxes and Certain Other Debts Owed to Governmental Units
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CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT ENTITLED TO PRIORITY	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY
ACCT #: xxx-xx-0814 Department of Treasury Internal Revenue Service PO Box 480 Holtsville, NY 11742-0480	X J	DATE INCURRED: 2007 through 2014 CONSIDERATION: 1040 Taxes REMARKS:				\$77,670.00	\$77,670.00	\$0.00
ACCT #: xxx-xx-0814 Illinois Department of Revenue c/o Linebarger, Goggan, Blair, Simpson 233 S. Wacker Dr., Suite 60606	J	DATE INCURRED: 2006 through 2014 CONSIDERATION: 1040 Taxes REMARKS:				\$21,479.00	\$21,479.00	\$0.00
Sheet no. <u>1</u> of <u>1</u> continuation sheets attached to Schedule of Creditors Holding Priority Claims						\$99,149.00	\$99,149.00	\$0.00
Subtotals (Totals of this page) >						\$99,149.00		
Total > (Use only on last page of the completed Schedule E. Report also on the Summary of Schedules.)								
Totals > (Use only on last page of the completed Schedule E. If applicable, report also on the Statistical Summary of Certain Liabilities and Related Data.)							\$99,149.00	\$0.00

B6F (Official Form 6F) (12/07)
In re **Randy Stroh**

Case No. _____
(if known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCT #: xxxx xxxx xxxx 5426 Advanta Credit Cards PO Box 660676 Dallas, TX 75266-0676	H	DATE INCURRED: Various CONSIDERATION: Credit Card REMARKS:				\$1,627.00
ACCT #: xxxx xxxx xxxx 6692 American Eagle Outfitters PO Box 960013 Orlando, FL 32896-0013	X W	DATE INCURRED: Various CONSIDERATION: Credit Card REMARKS:				\$2,345.00
ACCT #: x-x4008 American Express Box 0001 Los Angeles, CA 90096-8000	X W	DATE INCURRED: Various CONSIDERATION: Credit Card REMARKS:				\$23,090.00
ACCT #: xxxx xxxx xxxx 2494 Chase c/o Cardmember Services PO Box 15153 Wilmington, DE 19886-5153	X W	DATE INCURRED: Various CONSIDERATION: Credit Card REMARKS:				\$349.00
ACCT #: xxxx xxxx xxxx 1074 Citi Premier Pass c/o Citi Cards Processing Center Des Moines, IA 50363-0005	H	DATE INCURRED: Various CONSIDERATION: Credit Card REMARKS:				\$2,664.00
ACCT #: xxxx xxxx xxxx 3107 Citi Premier Pass c/o Citi Cards Processing Center Des Moines, IA 50363-0005	X W	DATE INCURRED: Various CONSIDERATION: Credit Card REMARKS:				\$10,144.00
Subtotal >						\$40,219.00
Total > (Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)						

1 continuation sheets attached

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)		CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCT #: xxxx xxxx xxxx 9250	Discover PO Box 6103 Carol Stream, IL 60197-6103	H	DATE INCURRED: Various CONSIDERATION: Credit Card REMARKS:				\$5,375.00
ACCT #: xxxx xxxx xxxx 9323	Home Depot Credit Services Processing Center Des Moines, IA 50364-0500	H	DATE INCURRED: Various CONSIDERATION: Credit Card REMARKS:				\$3,929.00
ACCT #: xxx xxxx 503	Kohl's Payment Center PO Box 2983 Milwaukee, WI 53201-2983	X W	DATE INCURRED: Various CONSIDERATION: Credit Card REMARKS:				\$1,033.00
ACCT #: xxxx xxxx xxxx 3113	State Farm Bank PO Box 23025 Columbus, GA 31902-3025	X H	DATE INCURRED: Various CONSIDERATION: Credit Card REMARKS:				\$14,200.00
ACCT #: xxxx xxxx xxxx 9145	TJX Rewards PO Box 530948 Atlanta, GA 30353-0948	X W	DATE INCURRED: Various CONSIDERATION: Credit Card REMARKS:				\$392.00
Sheet no. <u>1</u> of <u>1</u> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims							Subtotal > Total > (Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)
							\$24,929.00 \$65,148.00

B6G (Official Form 6G) (12/07)

In re **Randy Stroh**

Case No. _____
(if known)

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases of contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☒ Check this box if debtor has no executory contracts or unexpired leases.

NAME AND MAILING ADDRESS, INCLUDING ZIP CODE, OF OTHER PARTIES TO LEASE OR CONTRACT.	DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST. STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT.

B6H (Official Form 6H) (12/07)

In re **Randy Stroh**

Case No. _____
(if known)

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by the debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight-year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☐ Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR
Deliver Care Inc. 1084 Heavens Gate Lake in the Hills, IL 60156	State Farm Bank PO Box 23025 Columbus, GA 31902-3025
Lori Stroh 1084 Heavens Gate Lake in the Hills, IL 60156	Department of Treasury Internal Revenue Service PO Box 480 Holtsville, NY 11742-0480
Lori Stroh 1084 Heavens Gate Lake in the Hills, 60156	Citi Premier Pass c/o Citi Cards Processing Center Des Moines, IA 50363-0005
Lori Stroh 1084 Heavens Gate Lake in the Hills, IL 60156	American Express Box 0001 Los Angeles, CA 90096-8000
Lori Stroh 1084 Heavens Gate Lake in the Hills, IL 60156	TJX Rewards PO Box 530948 Atlanta, GA 30353-0948
Lori Stroh 1084 Heavens Gate Lake in the Hills, IL 60156	Kohl's Payment Center PO Box 2983 Milwaukee, WI 53201-2983
Lori Stroh 1084 Heavens Gate Lake in the Hills, IL 60156	Chase c/o Cardmember Services PO Box 15153 Wilmington, DE 19886-5153

In re **Randy Stroh**

Case No. _____

(if known)

SCHEDULE H - CODEBTORS*Continuation Sheet No. 1*

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR
Lori Stroh 1084 Heavens Gate Lake in the Hills, IL 60156	American Eagle Outfitters PO Box 960013 Orlando, FL 32896-0013
Spouse Name Not Entered	Department of Treasury Internal Revenue Service PO Box 480 Holtsville, NY 11742-0480
Spouse Name Not Entered	Illinois Department of Revenue c/o Linebarger, Goggan, Blair, Simpson 233 S. Wacker Dr., Suite 60606
Spouse Name Not Entered	McCormick 106 LLC c/o Mitchell A. Lieberman NOONAN & IIBERMAN, LTD 105 W. Adams St., Suite 1800 Chicago, IL 60603
Spouse Name Not Entered	Wells Fargo Dealer Finance PO Box 25341 Santa Ana, CA 92799-5344
Spouse Name Not Entered	Wells Fargo Dealer Finance PO Box 25341 Santa Ana, CA 92799-5344

Fill in this information to identify your case:

Debtor 1	Randy		Stroh
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)			
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)			

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing post-petition chapter 13 income as of the following date:

MM / DD / YYYY

Official Form B 6I

Schedule I: Your Income

12/13

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment

1. Fill in your employment information.

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

Employment status

Debtor 1

- ☒ Employed
☐ Not employed

Occupation

President - Self employed

Employer's name

Efficiency Transport Inc. d/b/a Deliv

Employer's address

1084 Heavens Gate
Number Street

Debtor 2 or non-filing spouse

- ☒ Employed
☐ Not employed

Vice President

Efficeincy Transport Inc. d/b/a Deliv

1084 Heavens Gate
Number Street

Lake in the Hills IL 60156
City State Zip Code

Lake in the Hil IL 60156
City State Zip Code

How long employed there? **5 yrs**

5 yrs

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

	For Debtor 1	For Debtor 2 or non-filing spouse
2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	\$0.00	\$6,500.00
3. Estimate and list monthly overtime pay.	\$0.00	\$0.00
4. Calculate gross income. Add line 2 + line 3.	\$0.00	\$6,500.00

Debtor 1 **Randy** **Stroh** Case number (if known)

First Name Middle Name Last Name

		For Debtor 1		For Debtor 2 or non-filing spouse
Copy line 4 here →	4.	\$0.00		\$6,500.00
5. List all payroll deductions:				
5a. Tax, Medicare, and Social Security deductions	5a.	\$0.00		\$2,166.67
5b. Mandatory contributions for retirement plans	5b.	\$0.00		\$0.00
5c. Voluntary contributions for retirement plans	5c.	\$0.00		\$0.00
5d. Required repayments of retirement fund loans	5d.	\$0.00		\$0.00
5e. Insurance	5e.	\$0.00		\$0.00
5f. Domestic support obligations	5f.	\$0.00		\$0.00
5g. Union dues	5g.	\$0.00		\$0.00
5h. Other deductions. Specify: _____	5h. +	\$0.00		\$0.00
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h.	6.	\$0.00		\$2,166.67
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$0.00		\$4,333.33
8. List all other income regularly received:				
8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$100.00		\$0.00
8b. Interest and dividends	8b.	\$0.00		\$0.00
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$0.00		\$0.00
8d. Unemployment compensation	8d.	\$0.00		\$0.00
8e. Social Security	8e.	\$0.00		\$0.00
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) or any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: _____	8f.	\$0.00		\$0.00
8g. Pension or retirement income	8g.	\$0.00		\$0.00
8h. Other monthly income. Specify: _____	8h. +	\$0.00		\$0.00
9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9.	\$100.00		\$0.00
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$100.00	+ \$4,333.33	= \$4,433.33
11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: _____				
	11.	+		\$0.00
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies.	12.			\$4,433.33
Combined monthly income				
13. Do you expect an increase or decrease within the year after you file this form?				
<input checked="" type="checkbox"/> No. None.				
<input type="checkbox"/> Yes. Explain:				

Debtor 1 **Randy**
First Name Middle Name Last Name

Case number (if known)

8a. Attached Statement (Debtor 1)

Deliver Care Inc.

Gross Monthly Income:			\$100.00
<u>Expense</u>	<u>Category</u>	<u>Amount</u>	
Total Monthly Expenses			\$0.00
Net Monthly Income:			\$100.00

Fill in this information to identify your case:

Debtor 1	Randy		Stroh
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)			
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)			

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing post-petition chapter 13 expenses as of the following date: _____
MM / DD / YYYY
- ☐ A separate filing for Debtor 2 because Debtor 2 maintains a separate household

Official Form B 6J

Schedule J: Your Expenses

12/13

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household

1. Is this a joint case?

- ☒ No. Go to line 2.
- ☐ Yes. **Does Debtor 2 live in a separate household?**
- ☐ No
- ☐ Yes. Debtor 2 must file a separate Schedule J.

2. Do you have dependents?

Do not list Debtor 1 and Debtor 2.

Do not state the dependents' names.

☐ No

☒ Yes. Fill out this information for each dependent.....

Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
Son	17	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
Daughter	15	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
Son	12	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
		<input type="checkbox"/> No <input type="checkbox"/> Yes
		<input type="checkbox"/> No <input type="checkbox"/> Yes

3. Do your expenses include expenses of people other than yourself and your dependents?

- ☒ No
- ☐ Yes

Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form B 6I.)

Your expenses

4. The rental or home ownership expenses for your residence.
Include first mortgage payments and any rent for the ground or lot.

4. \$2,863.00

If not included in line 4:

- 4a. Real estate taxes
- 4b. Property, homeowner's, or renter's insurance
- 4c. Home maintenance, repair, and upkeep expenses
- 4d. Homeowner's association or condominium dues

4a. \$655.00

4b. _____

4c. _____

4d. _____

Debtor 1 **Randy** **Stroh** Case number (if known) _____
 First Name Middle Name Last Name

Your expenses

5. Additional mortgage payments for your residence , such as home equity loans	5.	_____
6. Utilities:		
6a. Electricity, heat, natural gas	6a.	<u>\$400.00</u>
6b. Water, sewer, garbage collection	6b.	<u>\$100.00</u>
6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	<u>\$140.00</u>
6d. Other. Specify: _____	6d.	_____
7. Food and housekeeping supplies	7.	<u>\$1,200.00</u>
8. Childcare and children's education costs	8.	_____
9. Clothing, laundry, and dry cleaning	9.	<u>\$200.00</u>
10. Personal care products and services	10.	<u>\$150.00</u>
11. Medical and dental expenses	11.	<u>\$1,000.00</u>
12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12.	_____
13. Entertainment, clubs, recreation, newspapers, magazines, and books	13.	_____
14. Charitable contributions and religious donations	14.	<u>\$700.00</u>
15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.		
15a. Life insurance	15a.	<u>\$100.00</u>
15b. Health insurance	15b.	_____
15c. Vehicle insurance	15c.	<u>\$363.00</u>
15d. Other insurance. Specify: _____	15d.	_____
16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: _____	16.	_____
17. Installment or lease payments:		
17a. Car payments for Vehicle 1 2007 Honda CRV	17a.	<u>\$369.00</u>
17b. Car payments for Vehicle 2 2005 Mustang	17b.	<u>\$228.00</u>
17c. Other. Specify: Support for Son Mission Trip	17c.	<u>\$400.00</u>
17d. Other. Specify: _____	17d.	_____
18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form B 6I).	18.	_____
19. Other payments you make to support others who do not live with you. Specify: _____	19.	_____
20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.		
20a. Mortgages on other property	20a.	_____
20b. Real estate taxes	20b.	_____
20c. Property, homeowner's, or renter's insurance	20c.	_____
20d. Maintenance, repair, and upkeep expenses	20d.	_____
20e. Homeowner's association or condominium dues	20e.	_____

Debtor 1 **Randy**

First Name Middle Name Last Name

Stroh

Case number (if known)

21. Other. Specify: _____ 21. + _____

22. Your monthly expenses. Add lines 4 through 21.
The result is your monthly expenses. 22.

\$8,868.00

23. Calculate your monthly net income.

23a. Copy line 12 (your combined monthly income) from Schedule I. 23a.

\$4,433.33

23b. Copy your monthly expenses from line 22 above. 23b. -

\$8,868.00

23c. Subtract your monthly expenses from your monthly income.
The result is your monthly net income. 23c.

(\$4,434.67)

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

☐ No.

☒ Yes.

Explain here:

Decrease of approximately \$1,500 per month. Debtor will be renting a residence at an estimated amount of \$2,000.00 per month.

**UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF ILLINOIS
WESTERN DIVISION (ROCKFORD)**

In re **Randy Stroh**

Case No.

Chapter **7**

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors also must complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	\$190,000.00		
B - Personal Property	Yes	4	\$17,500.00		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	1			\$326,970.00
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	2			\$99,149.00
F - Creditors Holding Unsecured Nonpriority Claims	Yes	2			\$65,148.00
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	2			
I - Current Income of Individual Debtor(s)	Yes	3			\$4,433.33
J - Current Expenditures of Individual Debtor(s)	Yes	3			\$8,868.00
TOTAL		20	\$207,500.00	\$491,267.00	

**UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF ILLINOIS
WESTERN DIVISION (ROCKFORD)**

In re **Randy Stroh**

Case No.

Chapter **7**

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11, or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	\$0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	\$99,149.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	\$0.00
Student Loan Obligations (from Schedule F)	\$0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	\$0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	\$0.00
TOTAL	\$99,149.00

State the following:

Average Income (from Schedule I, Line 12)	\$4,433.33
Average Expenses (from Schedule J, Line 22)	\$8,868.00
Current Monthly Income (from Form 22A-1 Line 11; OR, Form 22B Line 14; OR, Form 22C-1 Line 14)	\$6,600.00

State the following:

1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column		\$128,000.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column.	\$99,149.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		\$0.00
4. Total from Schedule F		\$65,148.00
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		\$193,148.00

B 201B (Form 201B) (12/09)

**UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF ILLINOIS
WESTERN DIVISION (ROCKFORD)**

In re **Randy Stroh**

Case No. _____

Chapter 7

**CERTIFICATION OF NOTICE TO CONSUMER DEBTOR(S)
UNDER § 342(b) OF THE BANKRUPTCY CODE**

Certification of the Debtor

I (We), the debtor(s), affirm that I (we) have received and read the attached notice, as required by § 342(b) of the Bankruptcy Code.

<u>Randy Stroh</u>	X <u>/s/ Randy Stroh</u>	<u>5/21/2015</u>
Printed Name(s) of Debtor(s)	Signature of Debtor	Date
Case No. (if known) _____	X _____	_____
	Signature of Joint Debtor (if any)	Date

Certificate of Compliance with § 342(b) of the Bankruptcy Code

I, **Kenneth E. Kaiser**, counsel for Debtor(s), hereby certify that I delivered to the Debtor(s) the Notice required by § 342(b) of the Bankruptcy Code.

/s/ Kenneth E. Kaiser

Kenneth E. Kaiser, Attorney for Debtor(s)
Bar No.: 1384090
Kenneth E. Kaiser
502 N. Plum Grove Rd.
Palatine, IL 60067
Phone: (847) 991-6675
Fax: (847) 991-6476
E-Mail: kkaiser264@aol.com

Instructions: Attach a copy of Form B 201A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) ONLY if the certification has NOT been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

UNITED STATES BANKRUPTCY COURT

**NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b)
OF THE BANKRUPTCY CODE**

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a JOINT CASE (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days BEFORE the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

Chapter 7: Liquidation (\$245 filing fee, \$75 administrative fee, \$15 trustee surcharge: Total fee \$335)

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

Chapter 13: Repayment of All or Part of the Debts of an Individual with Regular Income
(\$235 filing fee, \$75 administrative fee: Total fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1167 filing fee, \$550 administrative fee: Total fee \$1717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Fill in this information to identify your case:

Debtor 1	Randy		Stroh
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)			
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS			
Case number (if known)			

Check one box only as directed in this form and in Form 22A-1Supp:

- ☒ 1. There is no presumption of abuse.
- ☐ 2. The calculation to determine if a presumption of abuse applies will be made under Chapter 7 Means Test Calculation (Official Form 22A-2).
- ☐ 3. The Means Test does not apply now because of qualified military service but it could apply later.

☐ Check if this is an amended filing

Official Form 22A-1

Chapter 7 Statement of Your Current Monthly Income

12/14

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file the Statement of Exemption from Presumption of Abuse Under § 707(b)(2) (Official Form 22A-1Supp) with this form.

Part 1: Calculate Your Current Monthly Income

1. What is your marital and filing status? Check one only.

- ☐ Not married. Fill out Column A, lines 2-11.
- ☐ Married and your spouse is filing with you. Fill out both Columns A and B, lines 2-11.
- ☒ Married and your spouse is NOT filing with you. You and your spouse are:
- ☒ Living in the same household and are not legally separated. Fill out both Columns A and B, lines 2-11.
- ☐ Living separately or are legally separated. Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C. § 707(b)(7)(B).

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

	Column A Debtor 1	Column B Debtor 2 or non-filing spouse
2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions).	<u>\$100.00</u>	<u>\$6,500.00</u>
3. Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in.	<u>\$0.00</u>	<u>\$0.00</u>
4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3.	<u>\$0.00</u>	<u>\$0.00</u>

Debtor 1 **Randy** **Stroh** Case number (if known) _____
 First Name Middle Name Last Name

Column A
Debtor 1

Column B
Debtor 2 or
non-filing spouse

5. Net income from operating a business, profession, or farm

Gross receipts (before all deductions) \$0.00
 Ordinary and necessary operating expenses — \$0.00
 Net monthly income from a business, profession, or farm \$0.00 Copy here → \$0.00 \$0.00

6. Net income from rental and other real property

Gross receipts (before all deductions) \$0.00
 Ordinary and necessary operating expenses — \$0.00
 Net monthly income from rental or other real property \$0.00 Copy here → \$0.00 \$0.00

7. Interest, dividends, and royalties

\$0.00 \$0.00

8. Unemployment compensation

\$0.00 \$0.00

Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here:↓

For you..... \$0.00
 For your spouse..... \$0.00

9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act.

\$0.00 \$0.00

10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total on line 10c.

10a. _____
 10b. _____
 10c. Total amounts from separate pages, if any. + _____ + _____

11. Calculate your total current monthly income.

Add lines 2 through 10 for each column.
 Then add the total for Column A to the total for Column B.

\$100.00 + \$6,500.00 = \$6,600.00

Total current
monthly income

Part 2: Determine Whether the Means Test Applies to You

12. Calculate your current monthly income for the year. Follow these steps:

12a. Copy your total current monthly income from line 11..... Copy line 11 here → 12a. \$6,600.00
 Multiply by 12 (the number of months in a year). X 12
 12b. The result is your annual income for this part of the form. 12b. \$79,200.00

Debtor 1 **Randy** **Stroh** _____
First Name Middle Name Last Name Case number (if known) _____

13. Calculate the median family income that applies to you. Follow these steps:

Fill in the state in which you live.

Illinois

Fill in the number of people in your household.

5

Fill in the median family income for your state and size of household..... 13.

\$93,001.00

To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.

14. How do the lines compare?

- 14a. ☒ Line 12b is less than or equal to line 13. On the top of page 1, check box 1, *There is no presumption of abuse.*
Go to Part 3.
- 14b. ☐ Line 12b is more than line 13. On the top of page 1, check box 2, *The presumption of abuse is determined by Form 22A-2.*
Go to Part 3 and fill out Form 22A-2.

Part 3: Sign Below

By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.

X /s/ Randy Stroh
Randy Stroh

X _____
Signature of Debtor 2

Date 5/21/2015
MM / DD / YYYY

Date _____
MM / DD / YYYY

If you checked line 14a, do NOT fill out or file Form 22A-2.

If you checked line 14b, fill out Form 22A-2 and file it with this form.